# P16000070811

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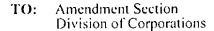


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#### **COVER LETTER**



SUBJECT: ROTTMANN, CORP

(Name of Corporation)

DOCUMENT NUMBER: P16000070811

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

## **OSCAR GRISALES RACINI**

(Name of Person)

(Name of Firm/Company)

1395 BRICKELL AVE, 14TH FLOOR

(Address)

MIAMI, FL 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

SANDRA GOMEZ

<sub>.,,</sub>305 \792-0439

(Name of Person)

(Area Code & Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**Mailing Address:** 

Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

### RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

BIT OCT 3 LAK & 38 Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509. Florida Statutes, the undersigned, OSCAR GRISALES RACINI PA (Name of Registered Agent) hereby resigns as Registered Agent for ROTTMANN, CORP (Name of Corporation) P16000070811 (Document Number, if known) A copy of this resignation was mailed to the above listed corporation at its last known address. The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed. If signing on behalf of an entity:

## **OSCAR GRISALES RACINI**

(Typed or Printed Name)

**PRESIDENT** 

(Capacity)

#### Fee for filing this document:

\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314